PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			41	41		•		RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		1	BASIC FE	€ 385.00	OR	BASIC FEI	770.00	
TOTAL CHARGEABLE CLAIMS			'// minus 20≖		•	21		XS 9=		OR	X\$18=	378	
INDEPENDENT CLAIMS			3 minus 3 =		•			X43=		OR	X86=		
MULTIPLE DEPENDENT CLAIM PR			RESENT					+145=		OR			
• If the difference in column 1 is less than zero, enter "0" in column 2							ļ	TOTAL	<u> </u>	OR	TOTAL	1148	
	. ((Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)			<u> </u>	SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	DENIDENT.	CI A154	-		X43=		OR	X86=		
<u> </u>	·	INTRION OF IN	OLTIPLE DE	PENDENT	CLAIM		ן י	+145=		OR	+290=		
											TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)											NUUII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBI PREVIOL PAID FI	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus			= "		X\$ 9=		OR	X\$18=		
	Independent	•	Minus			=		X43= ·	·	OR	X86=		
Ц	PINST PRESE	NTATION OF MU	JUIPLE DEI	PENDENT	CLAIM			+145=		OR	+290=		
								TOTAL DIT. FEE			TOTAL DDIT, FEE	-	
		(Column 1)		(Columr		(Column 3)			٠.		DOM: FEEL		
AMENDMENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		3		X\$ 9=		OR	X\$18=		
AME		•	Minus	***		=		X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								. 	OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEET													
!	the "Highest Nun	iber Previously Pai hber Previously Paid per Previously Paid	d For IN THIS	S SPACE is le	ess than	3. enter "3."		DIT. FEE'L			DOTT. FEE		
•	·					•		•	•	• • •			